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SOMERSET CONFERENCE ROOM 6TH FLOOR

PUBLIC SESSION MINUTES

October 7, 2014

The October meeting of the New Jersey Board of Respiratory Care was convened in accordance with its notice to the Lieutenant Governor, The Bergen Record, the Trenton Times, the Courier Post and the Star Ledger and was conducted in accordance with the provisions of the Open Public Meetings Act.

Vice Chairman Brown convened the meeting at 10:00 a.m. A roll call was taken and the following attendance was recorded for these minutes.

PRESENT: Christopher Lange
James Brophy
Michael Brown
Janet Castronovo

EXCUSED: Kenneth Capek, Chairman

Also in attendance: Tobey Palan, Deputy Attorney General, Rachel Glasgow, Regulatory Analyst, Dorcas K. O'Neal, Executive Director and Bernadette Augustus, Staff.

Public attendance: Joseph Goss, RRT.

I. 1. APPROVAL OF MINUTES

- a.** The Board reviewed the Public Minutes of August 5, 2014. On a motion by James Brophy, seconded by Janet Castronovo, the Board unanimously approved the Public Minutes as submitted.

II. OLD BUSINESS/REAGENDIZED

- a. Request for Proposal (RFP) Continuing Education Audit- Francine Widrich was to present the requirements. REAGENDIZED**

III. NEW BUSINESS

- a. Transport Licensure, submitted by Chairman Kenneth Capek, for discussion. Regulatory Analyst Glasgow advised the Board that “Transport licensure” cannot be part of Sunset. The Board may review the provisions in the Department of Health regulations.**
- b. The Board reviewed a fax from Shalini Sachdeva, MS, ATP, RRTS, Vice President of a durable medical equipment Medicare and Medicaid contracted supplier in New Jersey, planning to add a respiratory line of products to their portfolio. A New Jersey licensed physician (MD) on staff who oversees operations can set up respiratory equipment in patient’s home when needed. Does that satisfy the requirement for having a licensed respiratory care practitioner on staff.**

The Board determined that, pursuant to N.J.A.C. 13:44F-3.3 (f), the licensed respiratory care practitioner who delegates tasks set forth in (d) above in an outpatient setting shall ensure a follow-up visit from a licensee or a person exempt from respiratory care licensure pursuant to N.J.S.A. 45:14E-9 (c), takes place within 24 hours of delivery of the equipment to the patient for the purpose of conducting an in-person assessment of the equipment. The follow-up visit shall be documented in writing.

- 1. The documentation of the follow-up visit shall be maintained for all patients during the course of respiratory care, and for a period of one year following the termination of respiratory care services.**
- 2. The documentation of the follow-up visit shall be available for the Board’s inspection on the business premises of the licensee or person exempt from licensure who conducts the follow-up visit, within 12 business hours of the Board’s request. For the purposes of this section, “business hours” is defined as the hours between 9:00 A.M. and 5:00 P.M. Monday through Friday.**

Also, the Board determined based upon the limited facts presented, is it not clear as to whether it is the intention to send a licensed physician to set up equipment and educate patients within 24 hours of delivery of equipment as required by law.

Querist will be so advised.

c. **Report on State Liasion Committee Conference, NBRC Olathe, Kansas 2014.
(by Mr. Brophy)**

Mr. Brophy attended the 2014 meeting of the State Licensure Liaison Group, sponsored by the NBRC and the American Association for Respiratory Care (AARC). The meeting was held September 12-13, 2014 at the NBRC Executive Office in Olathe, Kansas.

He stated that under Federal issues, HR 2619, would expand Medicare, it would permit Respiratory Care Therapists to provide self-management services to pulmonary patients in physician practices. This would allow respiratory therapists to bill for services. To qualify, a therapist must hold the RRT certification and have a bachelor's degree.

He stated that CoARC only accredits entry level programs. There are no four-year college nor advance degree programs. The AARC developed a "Primer" for states to use in anticipation of Sunset.

Mr. Brophy stated that the NBRC will give a single exam with separate passing points. It goes into effect January 15, 2015. The test will have different point cut offs. If the candidate gets above a certain point cut off, they may go on and take the Clinical Simulation exam. Upon passing, they will be awarded the RRT. If they fall below the cut off points they cannot take the Clinical Simulation exam, but will be awarded the CRT. The test is called the "Therapist Multiple Choice Test," (TMC). The PFT's test will be set up the same way, one test with cut off points which will determine CPFT or RPFT. The NBRC added an additional 70 testing sites.

The NBRC requires licensees to show continuing competency by obtaining 30 CEU's over five years in order to maintain their credentials. New Jersey is not affected. The New Jersey State Board of Respiratory care does not require licensees to maintain their NBRC credentials.

d. **The Board reviewed a fax from Kathie Lafland, RRT, Cooper University Hospital, Camden, New Jersey, inquiring as to whether a newly licensed respiratory care therapist can work as a Critical Care Technician.**

On a motion by Janet Castronovo, seconded by Christopher Lange, the Board determined that based upon the limited facts presented, nothing within the statutes and regulations preclude a respiratory care practitioner from working as a Critical Care Technician.

Querist will be so advised.

IV. LEGISLATION/REGULATIONS/REAGENDIZED

- a. **The Board reviewed SENATE, No. 2401, which was introduced on September 18, 2014 in the Senate and amends and repeals sections of N.J.S.A. 45:14E4, “Respiratory Care Practitioner Licensing Act.**

On a motion by James Brophy, seconded by Janet Castronovo, the Board supports Senate Bill No. 2401, as amended.

- b. The Board reviewed State Board of Respiratory Care Notice of Sunset, expiration April 4, 2015. **On a motion by Janet Castronovo, seconded by Christopher Lange, the Board voted to adopt N.J.A.C.13:44F, which is to be published in the New Jersey Register.**
- c. **The Board reviewed SUNSET 2015 -Summary Proposals/recommendations, submitted by Chairman Capek and made no changes.**
- d. **The Board reviewed Proposed Rule - N.J.A.C.13:44F-6.2, 7.2 and 7.3. Amendments were made. Reagendized.**
- e. **The Board reviewed Proposed N.J.A.C.13:44F-3.3, Delegation by a Respiratory Care Practitioner to Unlicensed Persons. Comments period ended September 5, 2014. On a motion by Janet Castronovo, seconded by James Brophy, the Board approved N.J.A.C.13:44F-3.3, as proposed.**
- f. The Board reviewed comment to Proposed Amendment N.J.A.C. 13:44F-3.3, from Jersey Association for Medical Equipment Services (JAMES).

On a motion by Janet Castronovo, seconded by Christopher Lange, the Board unanimously approved N.J.A.C. 13:44F-3.3, for adoption.

- g. **The Board reviewed PUBLIC LAW (P.L.1999, c.403(C.45:1-7.1 et seq.). An act concerning professional and occupational licenses, revising various parts of the statutory law and supplementing P.L.1999, c. 403 (C.45:1.7-1et seq).**

Regulations implementing the law will be drafted by the Regulatory Analyst.

V. INFORMATIONAL/FYI

None

VI. PUBLIC COMMENT

None.

VII. OTHER BUSINESS

None.

There being no other business to come before the Board in Public Session, on a motion by James Brophy, seconded by Christopher Lange, the meeting was adjourned and the Board moved into Executive Session for the purpose of receiving counsel, to review six items of old business and one item of new business.

The Board reconvened in Public Session. The next scheduled meeting is November 18, 2014. There being no other business to come before the Board, on a motion by James Brophy, seconded by Janet Castronovo, the Board adjourned the meeting at 2:30 P.M.

Respectfully submitted,

Dorcas K. O'Neal
Executive Director